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County of Los Angeles CHIEF EXECUTIVE OFFICE

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April 14, 2015

To: Mayor Michael D. Antonovich
Supervisor Hilda L. Solis
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Don Knabe

From: Sachi A. Hamai 
Interim Chief Executive Officer

Board of Supervisors
HILDA L. SOLIS
First District

MARK RIDLEY-THOMAS
Second District

SHEILA KUEHL
Third District

DON KNABE
Fourth District

MICHAEL D. ANTONOVICH
Fifth District

CEO ASSESSMENT OF BUDGET AND OPERATIONAL CHANGES NEEDED TO IMPLEMENT THE RECOMMENDATIONS OUTLINED IN THE CHIEF EXECUTIVE OFFICER'S JANUARY 12, 2015, AND THE DEPARTMENT OF HEALTH SERVICES' JANUARY 9, 2015, MEMORANDA TO THE BOARD OF SUPERVISORS

Background

In its final report entitled, *The Road to Safety for Our Children*, the Blue Ribbon Commission on Child Protection (BRCCP) made recommendations related to child safety and health services. The first recommendation called for the County to pair a Public Health Nurse (PHN) with a Children's Social Worker (CSW) when conducting a child abuse or neglect investigation for all children from birth at least until age one. The second recommendation called for the County to refer to the medical hub all detained children, and all other children under age one being investigated by the Department of Children and Family Services (DCFS). While the BRCCP indicated children under the age of one, the County expanded the age group to all children under 24 months of age. The third recommendation called for the County to conduct an assessment of its medical hubs.

On January 9, 2015, the Department of Health Services (DHS) issued a Board report reflecting its findings of its assessment of the strengths and weaknesses of the County medical hubs. DHS concluded that the six County-run medical hubs needed additional staffing and requested that medical hub staffing be increased by 14 Full-Time Equivalents (FTEs) funded from within DHS existing budget. DHS also concluded that mental health services should be provided at each medical hub.

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On January 12, 2015, the CEO issued a report containing a conceptual design of how PHNs could be paired with CSWs to conduct joint visits; and how mental health services could be co-located at each medical hub. The conceptual design recommended that the joint visit initiative be rolled out in phases, with Phase I including the Martin Luther King, Jr. Outpatient Medical Center and the DCFS Compton and Vermont Corridor regional offices. The conceptual design estimated that five PHNs would be needed to service the two DCFS offices. The conceptual design also included a funding request to hire seven staff to provide mental health services at the medical hubs.

On January 13, 2015, Supervisor Ridley-Thomas and Supervisor Kuehl introduced a motion adopted by the Board accepting the recommendations contained in the reports issued by DHS and the CEO. The Board requested a report back as part of the CEO's Recommended Fiscal Year 2015-16 Budget with an assessment of the budget and operational changes, including personnel and capital improvements, needed to implement the recommendations outlined in the DHS and CEO reports. This report is submitted in response to the Board's request.

DHS Medical Hub Augmentation Plan

On January 13, 2015, the Board approved DHS' request to add 14 items to its budget and ordered the CEO to take all necessary actionable items. The 14 FTEs requested by DHS will be funded by DHS within its existing budget. The CEO has granted DHS hiring authority for all 14 positions in the current budget year, and the permanent items will be added to the DHS' FY 2015-16 budget via the Recommended Budget. Also, DCFS has agreed to fund six additional Medical Case Worker IIs to assist with medical hub augmentation and to assist children and families referred to the medical hubs as a result of the joint visit initiative. The source of funding for the additional six Medical Case Worker IIs is in DCFS' Provisional Financing Unit (PFU) account.

As part of the medical hub augmentation plan, DMH will provide co-located mental health services at each medical hub. In the CEO's January 12, 2015 report, DMH requested authority to hire six Psychiatric Social Workers and a Clinical Mental Health Supervisor at an estimated cost of \$826,000, with \$741,000 being funded by the DCFS PFU account and the remaining \$85,000 in revenue offset. The CEO has granted DMH hiring authority to hire the six social workers and the supervisor in the current budget year. DMH will request that permanent items be added to its FY 2015-16 budget identifying the DCFS PFU account as the funding source.

Table 1: Medical Hub Expansion Budget: DHS and DMH

Dept.	Item	FTEs	S&EB	Ordinance Authority FY 2014-15	Budget Request FY 2015-16	Comments
DHS	Positions	14	\$1,998,363	✓	✓	Recommended Budget
	Medical Case Worker II	6	416,000	✓	✓	Final Changes - DCFS Funded
DMH	Psychiatric Social Worker II	6	697,000	✓	✓	Final Changes - DCFS Funded
	Supervisor	1	129,000	Hired	✓	Final Changes - DCFS Funded
TOTAL		27	\$3,239,363			

Public Health Nurse - Children's Social Worker Joint Visit

The conceptual design of the PHN CSW joint visit initiative estimated that five PHNs would be needed to service two DCFS Offices and the Board approved the addition of the five PHN items to DCFS' budget.

The Office of Child Protection (OCP) has worked closely with DCFS, DHS, Mental Health and Public Health on Phase I of the joint visit initiative. After working through various logistical considerations and staffing scenarios, DCFS has concluded that the number of additional PHNs required to staff Phase I should be increased. The OCP supports this request based on the following:

- 1) The conceptual design assumed that all joint visits would occur during conventional business hours, rather than nights and weekends, and therefore did not build in staff to handle visits during these time periods;
- 2) The conceptual design assumed that PHNs would primarily conduct joint visits. Next to conducting joint visits, following up with families and linking those families to services will be one of the main responsibilities of the PHNs; and
- 3) The conceptual design assumed that the need to conduct joint visits would occur in a serial fashion, rather than simultaneously, and therefore did not build in enough staff to address instances when there is a need to conduct more than one joint visit at, or near, the same point in time.

DCFS has developed a staffing plan to address each of the considerations above. Due to the need for an increased number of PHNs, additional PHN Supervisors will be needed as well. In order to implement the plan, DCFS plans to use a combination of

23 new hires and four transfers of existing staff. With respect to the new hires, DCFS requests nine PHNs, in addition to the five already approved, in order to staff the Phase I offices. DCFS further requests an additional six PHNs to provide coverage for nights and weekends for a total of 20 newly hired PHNs. In addition to the one Supervisor approved already, DCFS requests to hire two additional PHN Supervisors for a total of three hired PHN Supervisors. The cost of the salary and employee benefits for the previously approved and additional PHNs and Supervisors are identified in Table 2 below.

Table 2: Phase I DCFS Staffing Budget for PHNs

Dept.	Item	FTEs	S&EB	Ordinance Authority FY 2014-15	Budget Request FY 2015-16	Comments
DCFS	Public Health Nurses	20*	\$3,160,000	✓	No	Funded by DCFS PFU
	Public Health Nurse Supervisor	3**	525,000	✓	No	Funded by DCFS PFU
TOTAL		23	\$3,685,000			

*Five previously approved at a cost of \$790,000. ** One FTE previously approved at a cost of \$175,000.

DCFS intends to use ordinance items in the current budget year, if necessary, and for FY 2015-16 in order to fill these items. DCFS will request permanent items be added to its budget once countywide roll out of the joint visit initiative is completed.

Operational Changes

In its January 13, 2015 motion, the Board requested an update on other operational changes needed to implement both the medical hub augmentation and the PHN-CSW joint visit initiative. Continued planning for the medical hub augmentation and the joint visit initiative is underway. There is no request to include it in the Recommended Budget at this time. The CEO's progress report on the medical hub augmentation and the PHN-CSW joint visit initiative will be filed concurrent with this report. As the Departments work together to finalize plans and additional needs are identified, the Interim CEO will work with each Department and the OCP to conduct an assessment of necessary budget and operational changes, including personnel and capital improvements needed to complete the medical hub augmentation and implement additional phases of the joint visit initiative.

Each Supervisor
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If you have any questions, please contact Fesia Davenport at (213) 974-1186, or by email at fdavenport@ceo.lacounty.gov.

SAH:FD
VD:ljp

c: Executive Office, Board of Supervisors
Children and Family Services
County Counsel
Health Services
Mental Health
Public Health

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